

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000001684

FILED  
Jan 24, 2006  
Secretary of State

Entity Name: GALVA FOAM MARINE INDUSTRIES - MISSOURI, INC.

## Current Principal Place of Business:

436 S. STATE HWY. 7  
CAMDENTON, MO 65020

## New Principal Place of Business:

## Current Mailing Address:

% OTTER TAIL CORPORATION/ATTN: LEGAL DEPT  
PO BOX 9156  
FARGO, ND 581069156

## New Mailing Address:

% OTTER TAIL CORPORATION/ATTN: LEGAL DEPT  
PO BOX 9156  
FARGO, ND 58106

FEI Number: 43-1079583

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 US

## Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: AHLGREN, ERIK A  
Address: 1025 INTERNATIONAL DRIVE  
City-St-Zip: FERGUS FALLS, MN 56538

Title: V ( ) Delete  
Name: HOGE, CHARLES  
Address: 4334 18TH AVE. SW, #200  
City-St-Zip: FARGO, ND 58103

Title: D ( ) Delete  
Name: MOLBERT, LAURIS N  
Address: 4334 18TH AVE. SW, #200  
City-St-Zip: FARGO, ND 58103

Title: T ( ) Delete  
Name: MOUG, KEVIN G  
Address: 4334 18TH AVE. SW, #200  
City-St-Zip: FARGO, ND 58103

Title: S ( ) Delete  
Name: KOECK, GEORGE  
Address: 4334 18TH AVE. SW, #200  
City-St-Zip: FARGO, ND 58103

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D ( ) Change (X) Addition  
Name: ERICKSON, JOHN D  
Address: 215 S. CASCADE ST.  
City-St-Zip: FERGUS FALLS, MN 56538

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GEORGE KOECK

S

01/24/2006

Electronic Signature of Signing Officer or Director

Date